pplication or Docket Number

09/823943

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY					
TOTAL CLAIMS			36					RATE	FEE	1	RATE	FEE				
FOR			NUMBER FILED		NUMBE	R EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00				
TOTAL CHARGEABLE CLAIMS			36 minus 20=		16			X\$ 9=	,	OR	X\$18=	288				
INDEPENDENT CLAIMS			5 minus 3 =		2			X40=		OR	X80=	160				
MUI	TIPLE DEPEN	DENT CLAIM PF	RESENT					+135=		OR	+270=	A				
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1158				
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY OR			OTHER THAN SMALL ENTITY						
AMENDMENT A		CLAIMS REMAINING ÄFTER AMENDMENT		HIGH NUM PREVI	IEST BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
MON	Total	. 33	Minus	3	8			X\$ 9=		OR	X\$18=					
AME	Independent	. 4	Minus	***	<u>න</u>			X40=		OR	X80=					
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	PENDEN	TCLAIM			+135=		OR	+270=					
								TOTAL		ΛP	TOTAL					
		(Column 1)		(Colu	mn 2)	(Column 3)	3 7	ADDIT. FEE		Σ	ADDIT: FEE	*				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
IDMI	Total	.19	Minus	- 3	6			X\$ 9=		OR	X\$18=					
AME	Independent	·).	Minus		5			X40=	48	OR	X80=					
	FIRST PRESE	NTATION OF MI	JETIPLE DEP	PENDEN	I.CLAIM			+135=		OR	+270=					
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE					
			AUUII. FEE													
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE				
	Total 4		Minus			=		X\$ 9=	*	OR	X\$18=	<i>;</i>				
	Independent		Minus	•		i -		X40=		OR	X80=	;				
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							0		Lon	1					
	If the entry in colu	mn 1 is less then t	ne entry in colu	mn 2 wri	e "0" in co	lumn 3.		+135=	*	OR	+270=					
***	If the "Highest Nu If the "Highest Nu	mber Previously P	aid For IN THI aid For IN THI	S SPACE	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE TO											